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DECLARATION – Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Kenneth H.

Family Name

or Surname Purser

Inventor's

Signature

Kenneth H. Purser

Date

01/09/04

Residence: City Lexington

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Country

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Carl J.

Family Name

or Surname Russo

Inventor's

Signature

Carl J. Russo

21 Jan 04
Date

Residence: City Burlington

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Citizenship US

Mailing Address 106 Taine Mountain Road

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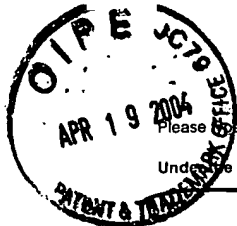
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☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



Please affix a plus sign (+) inside this box

+

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PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 3 of 3

| | | | |
|---|------------|---|-------|
| Name of Additional Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Norman L. | | Turner | |
| Inventor's Signature <i>Norman L. Turner</i> | | Date <i>1/09/04</i> | |
| Residence: City | Vero Beach | State | FL |
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| Citizenship US | | | |
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| | | | |
|--|--|---|--|
| Name of Additional Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
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| Inventor's Signature | | Date | |
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| Citizenship | | | |
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| City | | State | |
| | | ZIP | |
| | | Country | |

| | | | |
|--|--|---|--|
| Name of Additional Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
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| Inventor's Signature | | Date | |
| Residence: City | | State | |
| | | Country | |
| Citizenship | | | |
| Mailing Address | | | |
| City | | State | |
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PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

| | |
|------------------------|------------------------|
| Application Number | 10/733,779 |
| Filing Date | December 11, 2003 |
| First Named Inventor | Kenneth H. Purser |
| Title | Emittance Measuring... |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 527P021 |

I hereby appoint:

☒ Practitioners associated with the Customer Number:

42754

OR

☒ Practitioner(s) named below:

| Name | Registration Number |
|-----------------|---------------------|
| Kevin S. Lemack | 32,579 |
| Henry C. Nields | 17,029 |
| Robert Frame | 54,104 |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|--------------------------|----------------------|-------------------------|
| Name | Kenneth H. Purser | Carl J. Russo | Norman L. Turner |
| Signature | <i>Kenneth H. Purser</i> | <i>Carl J. Russo</i> | <i>Norman L. Turner</i> |
| Date | 01/09/04 | | 01/09/04 |
| Telephone | | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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